



COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

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As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled
IMAGE PROCESSOR, METHOD FOR PROCESSING IMAGE, PRINTING APPARATUS, PRINTING METHOD, PROGRAM, STORAGE MEDIUM THAT STORED COMPUTER-READABLE PROGRAM CODE

the specification of which () is attached hereto (X) was filed on July 13, 2001
as United States Application No. or PCT International Application No. 09/903,609
and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR §1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or §365(b), of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designates at least one country other than the United States, listed below and have also identified below any foreign application for patent or inventor's certificate, or PCT international application having a filing date before that of the application on which priority is claimed:

<u>Country</u>	<u>Application No.</u>	<u>Filed</u> (Day/Mo./Yr.)	<u>Priority Claimed</u> (Yes/No)
Japan	2000-216699	17/7/2000	Yes
Japan	2000-264355	31/8/2000	Yes
Japan	2001-199988	29/6/2001	Yes

I hereby appoint the practitioners associated with the firm and Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and direct that all correspondence be addressed to the address associated with that Customer Number:

FITZPATRICK, CELLA, HARPER & SCINTO
Customer Number: 05514

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Full Name of Sole or First Inventor Takayuki OGASAHARAInventor's signature Takayuki OgasaharaDate September 25, 2001 Citizen/Subject of JapanResidence Kanagawa, JapanPost Office Address CANON KABUSHIKI KAISHA3-30-2, Shimomaruko, Ohta-ku, Tokyo, JapanFull Name of Second Joint Inventor, if any Hiroshi TAJIKASecond Inventor's signature Hiroshi TajikaDate September 21, 2001 Citizen/Subject of JapanResidence Kanagawa, JapanPost Office Address CANON KABUSHIKI KAISHA3-30-2, Shimomaruko, Ohta-ku, Tokyo, JapanFull Name of Third Joint Inventor, if any Miyuki FUJITAThird Inventor's signature Miyuki FujitaDate September 28, 2001 Citizen/Subject of JapanResidence Tokyo, JapanPost Office Address 2-15-5, Miyamae, Suginami-ku, Tokyo, JapanFull Name of Fourth Joint Inventor, if any Yuji KONNOFourth Inventor's signature Yuji KonnoDate September 25, 2001 Citizen/Subject of JapanResidence Kanagawa, JapanPost Office Address CANON KABUSHIKI KAISHA3-30-2, Shimomaruko, Ohta-ku, Tokyo, JapanFull Name of Fifth Joint Inventor, if any Norihiro KAWATOKOFifth Inventor's signature Norihiro KawatokoDate September 22, 2001 Citizen/Subject of JapanResidence Kanagawa, JapanPost Office Address CANON KABUSHIKI KAISHA3-30-2, Shimomaruko, Ohta-ku, Tokyo, Japan

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Full Name of Ninth Joint Inventor, if any _____

Ninth Inventor's signature _____

Date _____ Citizen/Subject of _____

Residence _____

Post Office Address _____

Full Name of Tenth Joint Inventor, if any _____

Tenth Inventor's signature _____

Date _____ Citizen/Subject of _____

Residence _____

Post Office Address _____